



## Cement and Gypsum Producers License Tax

For quarter ending \_\_\_\_\_

Title 15, Chapter 59, Part 1, MCA

For Department Use Only	Name: _____			
	Address: _____			
	Address: _____			
	City: _____	State: _____	Zip Code: _____	
1. FEIN: _____		2. Account ID: _____		
3. Period: _____		4. If this is an amended return, check here <input type="checkbox"/>		
5. If you are no longer in business and want your account cancelled, enter the final date _____				
6. If your mailing address has changed, check the box and print new address below: <input type="checkbox"/> _____ _____				
Quarterly Production Report		Tons	Rate	Tax Due
7. Number of tons of gypsum produced and sold as: gypsum, land plaster, gypsum rock, or unprocessed gypsum			X \$0.05 =	\$
8. Number of tons of gypsum produced and made into plaster, stucco, wallboard or other products of gypsum			X \$0.05 =	\$
9. Number of tons of gypsum or gypsum products containing not less than 50% of gypsum imported into the state			X \$0.05 =	\$
10. Number of tons of cement manufactured in or imported into the state			X \$0.22 =	\$
11. <b>Total Tax Due</b> (add lines 7, 8, 9, and 10)				\$

Returns are due 30 days after the end of each calendar quarter. Penalties and Interest will be applied if late.

I hereby swear or affirm under penalty of perjury that the statements contained herein are true to the best of my knowledge.

Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Mail this return to:  
Department of Revenue, PO Box 5805, Helena MT 59604-5805



**Cement and Gypsum Producers License Tax  
(CGT)  
Payment Instructions**  
Attention: Montana Department of Revenue Cashier

Complete the payment coupon below to ensure proper credit of your payment. If you are paying taxes for multiple periods, submit a separate check or money order and a separate coupon for **each** period. On the memo line of your check, please note your FEIN or account ID and the reporting period for which the payment applies.

Boxes 1 and 2 – Print an “X” in **one** box only for the type of payment you are remitting:

Check box 1, if your payment is for an original return for any period.

Check box 2, if your payment is for an amended return.

Box 3 – Enter the reporting period for which this payment applies.

Box 4 – Enter your federal employer identification number (FEIN).

Box 5 – Enter the amount you are remitting. (This amount should be the same amount as reported on line 11 of your return).

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

**Mail this entire form with your check or money order and return to:**

Department of Revenue

PO Box 5805

Helena, MT 59604-5805

Questions? Call (406) 444-6900.

Make check or money order payable to the Department of Revenue.

**Cement and Gypsum Producers License Tax  
Payment Form**

☐ 1. Original return

☐ 2. Amended return

3. Period ending      month    day    year  
   /           /

4. Federal employer  
identification  
number (FEIN)      -

5. Amount paid